## APPLICATION FOR SEARCH OF MARRIAGE RECORD FILES

Grooms Name:				
First	Middle			Last
Brides Name:				
(At the time applied for marriage) First	Middle			Last
Date of Marriage:			_	
Month	Day	Year		
Place of Marriage:				
Church o	or Place		City	
APPLICATION MADE BY:				MAIL COPY TO:
Name:				Name:
Address:				Address:
City:				City:
State:				State:
Zip:				Zip:
Your Relationship				
To Person:				Intended use Of Certification:
Phone Number				
Number of Copies Desired:				Amount Enclosed:

## \$7.00 First Copy, \$2.00 Each Additional

Send to: Ford County Clerk & Recorder 200 W. State St., Room 101 Paxton, IL. 60957